



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2002
OF THE CONDITION AND AFFAIRS OF THE
Cape Health Plan, Inc.

NAIC Group Code	0000 <small>(Current Period)</small>	0000 <small>(Prior Period)</small>	NAIC Company Code	95759	Employer's ID Number	38-2455176
Organized under the Laws of	Michigan			State of Domicile or Port of Entry	Michigan	
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health []		Property/Casualty []		Dental Service Corporation []	
	Vision Service Corporation []		Other []		Health Maintenance Organization [X]	
	Hospital, Medical & Dental Service or Indemnity []				Is HMO, Federally Qualified? Yes [] No [X]	
Incorporated	04/29/1982		Commenced Business		04/29/1982	
Statutory Home Office	26711 Northwestern Highway, Suite 300 <small>(Street and Number)</small>			Southfield, MI 48034 <small>(City or Town, State and Zip Code)</small>		
Main Administrative Office	26711 Northwestern Highway, Suite 300 <small>(Street and Number)</small>					
	Southfield, MI 48034 <small>(City or Town, State and Zip Code)</small>			248-386-3000 <small>(Area Code) (Telephone Number)</small>		
Mail Address	26711 Northwestern Highway, Suite 300 <small>(Street and Number or P.O. Box)</small>			Southfield, MI 48034 <small>(City or Town, State and Zip Code)</small>		
Primary Location of Books and Records	26711 Northwestern Highway, Suite 300 <small>(Street and Number)</small>					
	Southfield, MI 48034 <small>(City or Town, State and Zip Code)</small>			248-386-3003 <small>(Area Code) (Telephone Number)</small>		
Internet Website Address	www.capehealth.com					
Statement Contact	THOMAS ASHFORD MURAR MR. <small>(Name)</small>			248-386-3003 <small>(Area Code) (Telephone Number) (Extension)</small>		
	tmurar@capehealth.com <small>(E-mail Address)</small>			248-945-9149 <small>(FAX Number)</small>		
Policyowner Relations Contact	26711 NORTHWESTERN HIGHWAY, SUITE 300 <small>(Street and Number)</small>					
	SOUTHFIELD, MI 48034 <small>(City or Town, State and Zip Code)</small>			248-386-3003 <small>(Area Code) (Telephone Number) (Extension)</small>		

OFFICERS

President	Nancy Wanchik	Secretary	William Brodhead
Treasurer	Ralph Woronoff		

VICE PRESIDENTS

Tom Murar	Michele Lundberg	Steve Stein MD
Rodger Prong		

DIRECTORS OR TRUSTEES

Nancy Wanchik	Ralph Woronoff	Surjit Bhasin MD
Lynette Burns	Etrue Bryant	Shirley Lightsey
Tom Murar	Sue Sarin	William Brodhead
Janis Coleman	Myra French	Gladys Taylor

State ofMichigan.....
County ofMacomb.....
} ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

Nancy Wanchik President and Chief Operating Officer	Thomas Murar Chief Financial Officer	Susan Sarin Chief Executive Officer
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Subscribed and sworn to before me this 27 day of February, 2003	a. Is this an original filing? Yes [X] No [] b. If no 1. State the amendment number 2. Date filed 02/27/2003 3. Number of pages attached
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Linda Rusie
Notary Public
March 26, 2003

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT 3 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT 4 - HEALTH CARE RECEIVABLES

[illegible]

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ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

EXHIBIT 8 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

9999999 Totals	0	XXX	XXX	XXX
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EXHIBIT 9 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment	479,110		(222,935)	256,175		256,175
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	479,110	0	(222,935)	256,175	0	256,175



ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION		CAPE HEALTH PLAN, INC.				2. DIVISION		(LOCATION)			
NAIC Group Code	0000	BUSINESS IN THE STATE OF Michigan			DURING THE YEAR 2002			NAIC Company Code		95759	
		1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
			2 Individual	3 Group							
Total Members at end of:											
1. Prior Year		43,768								43,768	
2. First Quarter		45,039								45,039	
3. Second Quarter		46,488								46,488	
4. Third Quarter		52,591								52,591	
5. Current Year		54,171								54,171	
6. Current Year Member Months		584,729								584,729	
Total Member Ambulatory Encounters for Year:											
7. Physician		37,548								37,548	
8. Non-Physician		18,535								18,535	
9. Total		56,083	0	0	0	0	0	0	0	56,083	0
10. Hospital Patient Days Incurred		22,150								22,150	
11. Number of Inpatient Admissions		4,921								4,921	
12. Premiums Collected		101,434,147								101,434,147	
13. Premiums Earned		101,434,147								101,434,147	
14. Amount Paid for Provision of Health Care Services		90,836,497								90,836,497	
15. Amount Incurred for Provision of Health Care Services		13,750,000								13,750,000	



ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION		CAPE HEALTH PLAN, INC.		2. DIVISION		(LOCATION)				
NAIC Group Code	0000	BUSINESS IN THE STATE OF Consolidated		DURING THE YEAR 2002			NAIC Company Code		95759	
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	43,768	0	0	0	0	0	0	0	43,768	0
2. First Quarter	45,039	0	0	0	0	0	0	0	45,039	0
3. Second Quarter	46,488	0	0	0	0	0	0	0	46,488	0
4. Third Quarter	52,591	0	0	0	0	0	0	0	52,591	0
5. Current Year	54,171	0	0	0	0	0	0	0	54,171	0
6. Current Year Member Months	584,729	0	0	0	0	0	0	0	584,729	0
Total Member Ambulatory Encounters for Year:										
7. Physician	37,548	0	0	0	0	0	0	0	37,548	0
8. Non-Physician	18,535	0	0	0	0	0	0	0	18,535	0
9. Total	56,083	0	0	0	0	0	0	0	56,083	0
10. Hospital Patient Days Incurred	22,150	0	0	0	0	0	0	0	22,150	0
11. Number of Inpatient Admissions	4,921	0	0	0	0	0	0	0	4,921	0
12. Premiums Collected	101,434,147	0	0	0	0	0	0	0	101,434,147	0
13. Premiums Earned	101,434,147	0	0	0	0	0	0	0	101,434,147	0
14. Amount Paid for Provision of Health Care Services	90,836,497	0	0	0	0	0	0	0	90,836,497	0
15. Amount Incurred for Provision of Health Care Services	13,750,000	0	0	0	0	0	0	0	13,750,000	0

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SCHEDULE A VERIFICATION BETWEEN YEARS

1. Book/adjusted carrying value, December 31, prior year (prior year statement)	0
2. Increase (decrease) by adjustment:	
2.1 Totals, Part 1, Column 10	0
2.2 Totals, Part 3, Column 7	0
3. Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9)	0
4. Cost of additions and permanent improvements:	
4.1 Totals, Part 1, Column 13	0
4.2 Totals, Part 3, Column 9	0
5. Total profit (loss) on sales, Part 3, Column 14	0
6. Increase (decrease) by foreign exchange adjustment:	
6.1 Totals, Part 1, Column 11	0
6.2 Totals, Part 3, Column 8	0
7. Amounts received on sales, Part 3, Column 11 and Part 1, Column 12	0
8. Book/adjusted carrying value at end of current period	0
9. Total valuation allowance	
10. Subtotal (Lines 8 plus 9)	0
11. Total nonadmitted amounts	
12. Statement value, current period (Page 2, real estate lines, current period)	0

SCHEDULE B VERIFICATION BETWEEN YEARS

1. Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year	0
2. Amount loaned during year:	
2.1 Actual cost at time of acquisitions	
2.2 Additional investment made after acquisitions	0
3. Accrual of discount and mortgage interest points and commitment fees	
4. Increase (decrease) by adjustment	
5. Total profit (loss) on sale	
6. Amounts paid on account or in full during the year	
7. Amortization of premium	
8. Increase (decrease) by foreign exchange adjustment	
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0
10. Total valuation allowance	
11. Subtotal (Lines 9 plus 10)	0
12. Total nonadmitted amounts	
13. Statement value of mortgages owned at end of current period	0

SCHEDULE BA VERIFICATION BETWEEN YEARS

1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	0
2. Cost of acquisitions during year:	
2.1 Actual cost at time of acquisitions	
2.2 Additional investment made after acquisitions	0
3. Accrual of discount	
4. Increase (decrease) by adjustment	
5. Total profit (loss) on sale	
6. Amounts paid on account or in full during the year	
7. Amortization of premium	
8. Increase (decrease) by foreign exchange adjustment	
9. Book/adjusted carrying value of long-term invested assets at end of current period	0
10. Total valuation allowance	
11. Subtotal (Lines 9 plus 10)	0
12. Total nonadmitted amounts	
13. Statement value of long-term invested assets at end of current period	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Class 1 .....						.0	.0.0	.0	.0.0		
1.2 Class 2 .....						.0	.0.0	.0	.0.0		
1.3 Class 3 .....						.0	.0.0	.0	.0.0		
1.4 Class 4 .....						.0	.0.0	.0	.0.0		
1.5 Class 5 .....						.0	.0.0	.0	.0.0		
1.6 Class 6						0	0.0	0	0.0		
1.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Class 1 .....						.0	0.0	.0	0.0		
2.2 Class 2 .....						.0	0.0	.0	0.0		
2.3 Class 3 .....						.0	0.0	.0	0.0		
2.4 Class 4 .....						.0	0.0	.0	0.0		
2.5 Class 5 .....						.0	0.0	.0	0.0		
2.6 Class 6						0	0.0	0	0.0		
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions etc., Guaranteed, Schedules D & DA (Group 3)											
3.1 Class 1 .....						.0	0.0	.0	0.0		
3.2 Class 2 .....						.0	0.0	.0	0.0		
3.3 Class 3 .....						.0	0.0	.0	0.0		
3.4 Class 4 .....						.0	0.0	.0	0.0		
3.5 Class 5 .....						.0	0.0	.0	0.0		
3.6 Class 6						0	0.0	0	0.0		
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Class 1 .....						.0	0.0	.0	0.0		
4.2 Class 2 .....						.0	0.0	.0	0.0		
4.3 Class 3 .....						.0	0.0	.0	0.0		
4.4 Class 4 .....						.0	0.0	.0	0.0		
4.5 Class 5 .....						.0	0.0	.0	0.0		
4.6 Class 6						0	0.0	0	0.0		
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Class 1 .....						.0	0.0	.0	0.0		
5.2 Class 2 .....						.0	0.0	.0	0.0		
5.3 Class 3 .....						.0	0.0	.0	0.0		
5.4 Class 4 .....						.0	0.0	.0	0.0		
5.5 Class 5 .....						.0	0.0	.0	0.0		
5.6 Class 6						0	0.0	0	0.0		
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations											
Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Class 1 .....						.0	.0.0	.0	.0.0		
6.2 Class 2 .....						.0	.0.0	.0	.0.0		
6.3 Class 3 .....						.0	.0.0	.0	.0.0		
6.4 Class 4 .....						.0	.0.0	.0	.0.0		
6.5 Class 5 .....						.0	.0.0	.0	.0.0		
6.6 Class 6						0	0.0	0	0.0		
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Class 1	1,004,000					1,004,000	100.0	1,189,000	100.0	1,004,000	
7.2 Class 2 .....						.0	.0.0	.0	.0.0		
7.3 Class 3 .....						.0	.0.0	.0	.0.0		
7.4 Class 4 .....						.0	.0.0	.0	.0.0		
7.5 Class 5 .....						.0	.0.0	.0	.0.0		
7.6 Class 6						0	0.0	0	0.0		
7.7 Totals	1,004,000	0	0	0	0	1,004,000	100.0	1,189,000	100.0	1,004,000	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Class 1 .....						.0	.0.0	.0	.0.0		
8.2 Class 2 .....						.0	.0.0	.0	.0.0		
8.3 Class 3 .....						.0	.0.0	.0	.0.0		
8.4 Class 4 .....						.0	.0.0	.0	.0.0		
8.5 Class 5 .....						.0	.0.0	.0	.0.0		
8.6 Class 6						0	0.0	0	0.0		
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1 .....						.0	.0.0	.0	.0.0		
9.2 Class 2 .....						.0	.0.0	.0	.0.0		
9.3 Class 3 .....						.0	.0.0	.0	.0.0		
9.4 Class 4 .....						.0	.0.0	.0	.0.0		
9.5 Class 5 .....						.0	.0.0	.0	.0.0		
9.6 Class 6						0	0.0	0	0.0		
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11
Quality Rating per the NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Col. 6 as a % of Line 10.7	Total from Col. 6 Prior Year	% From Col. 7 Prior Year	Total Publicly Traded	Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	1,004,000	.0	.0	.0	.0	1,004,000	100.0	XXX	XXX	1,004,000	.0
10.2 Class 2 .....	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.3 Class 3 .....	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.4 Class 4 .....	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.5 Class 5 .....	.0	.0	.0	.0	.0	(c) .0	0.0	XXX	XXX	.0	.0
10.6 Class 6 .....	.0	.0	.0	.0	.0	(c) .0	0.0	XXX	XXX	.0	.0
10.7 Totals	1,004,000	.0	.0	.0	.0	(b) 1,004,000	100.0	XXX	XXX	1,004,000	.0
10.8 Line 10.7 as a % of Col. 6	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Class 1 .....	.0	1,189,000	.0	.0	.0	XXX	XXX	1,189,000	100.0	1,189,000	.0
11.2 Class 2 .....	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.3 Class 3 .....	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.4 Class 4 .....	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.5 Class 5 .....	.0	.0	.0	.0	.0	XXX	XXX	(c) .0	0.0	.0	.0
11.6 Class 6 .....	.0	.0	.0	.0	.0	XXX	XXX	(c) .0	0.0	.0	.0
11.7 Totals .....	.0	1,189,000	.0	.0	.0	XXX	XXX	(b) 1,189,000	100.0	1,189,000	.0
11.8 Line 11.7 as a % of Col. 8	0.0	100.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Class 1	1,004,000					1,004,000	100.0	1,189,000	100.0	1,004,000	XXX
12.2 Class 2 .....						.0	0.0	.0	0.0	.0	XXX
12.3 Class 3 .....						.0	0.0	.0	0.0	.0	XXX
12.4 Class 4 .....						.0	0.0	.0	0.0	.0	XXX
12.5 Class 5 .....						.0	0.0	.0	0.0	.0	XXX
12.6 Class 6						0	0.0	0	0.0	0	XXX
12.7 Totals	1,004,000	.0	.0	.0	.0	1,004,000	100.0	1,189,000	100.0	1,004,000	XXX
12.8 Line 12.7 as a % of Col. 6	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1 .....						.0	0.0	.0	0.0	XXX	.0
13.2 Class 2 .....						.0	0.0	.0	0.0	XXX	.0
13.3 Class 3 .....						.0	0.0	.0	0.0	XXX	.0
13.4 Class 4 .....						.0	0.0	.0	0.0	XXX	.0
13.5 Class 5 .....						.0	0.0	.0	0.0	XXX	.0
13.6 Class 6						0	0.0	0	0.0	XXX	0
13.7 Totals .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ current year, \$ prior year of bonds with Z designations and \$, current year, \$ prior year of bonds with Z* designations. The letter “Z” means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. “Z*” means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.

(c) Includes \$ current year, \$ prior year of bonds with 5* designations and \$, current year, \$ prior year of bonds with 6* designations. “5*” means the NAIC designation was assigned by the SVO in reliance on the insurer’s certification that the issuer is current in all principal and interest payments. “6*” means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Issuer Obligations .....						.0	.0.0	.0	.0.0		
1.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
1.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Issuer Obligations .....						.0	.0.0	.0	.0.0		
2.2 Single Class Mortgage-Backed/Asset-Backed Securities .....						.0	.0.0	.0	.0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
2.3 Defined .....						.0	.0.0	.0	.0.0		
2.4 Other .....						.0	.0.0	.0	.0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
2.5 Defined .....						.0	.0.0	.0	.0.0		
2.6 Other						0	0.0	0	0.0		
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories, and Possessions Guaranteed, Schedules D & DA (Group 3)											
3.1 Issuer Obligations .....						.0	.0.0	.0	.0.0		
3.2 Single Class Mortgage-Backed/Asset-Backed Securities .....						.0	.0.0	.0	.0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
3.3 Defined .....						.0	.0.0	.0	.0.0		
3.4 Other .....						.0	.0.0	.0	.0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
3.5 Defined .....						.0	.0.0	.0	.0.0		
3.6 Other						0	0.0	0	0.0		
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Issuer Obligations .....						.0	.0.0	.0	.0.0		
4.2 Single Class Mortgage-Backed/Asset-Backed Securities .....						.0	.0.0	.0	.0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
4.3 Defined .....						.0	.0.0	.0	.0.0		
4.4 Other .....						.0	.0.0	.0	.0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
4.5 Defined .....						.0	.0.0	.0	.0.0		
4.6 Other						0	0.0	0	0.0		
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Issuer Obligations .....						.0	.0.0	.0	.0.0		
5.2 Single Class Mortgage-Backed/Asset-Backed Securities .....						.0	.0.0	.0	.0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
5.3 Defined .....						.0	.0.0	.0	.0.0		
5.4 Other .....						.0	.0.0	.0	.0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
5.5 Defined .....						.0	.0.0	.0	.0.0		
5.6 Other						0	0.0	0	0.0		
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Issuer Obligations						0	0.0	0	0.0		
6.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
6.3 Defined						0	0.0	0	0.0		
6.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
6.5 Defined						0	0.0	0	0.0		
6.6 Other						0	0.0	0	0.0		
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations	1,004,000					1,004,000	100.0	1,189,000	100.0	1,004,000	
7.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
7.3 Defined						0	0.0	0	0.0		
7.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
7.5 Defined						0	0.0	0	0.0		
7.6 Other						0	0.0	0	0.0		
7.7 Totals	1,004,000	0	0	0	0	1,004,000	100.0	1,189,000	100.0	1,004,000	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations						0	0.0	0	0.0		
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parents, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Issuer Obligations						0	0.0	0	0.0		
9.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
9.3 Defined						0	0.0	0	0.0		
9.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
9.5 Defined						0	0.0	0	0.0		
9.6 Other						0	0.0	0	0.0		
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total From Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations	1,004,000	0	0	0	0	1,004,000	100.0	XXX	XXX	1,004,000	0
10.2 Single Class Mortgage-Backed/Asset-Backed Bonds	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
10.3 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
10.5 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.6 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.7 Totals	1,004,000	0	0	0	0	1,004,000	100.0	XXX	XXX	1,004,000	0
10.8 Line 10.7 as a % of Col. 6	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations	0	1,189,000	0	0	0	XXX	XXX	1,189,000	100.0	1,189,000	0
11.2 Single Class Mortgage-Backed/Asset-Backed Bonds	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
11.3 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
11.5 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.6 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.7 Totals	0	1,189,000	0	0	0	XXX	XXX	1,189,000	100.0	1,189,000	0
11.8 Line 11.7 as a % of Col. 8	0.0	100.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	1,004,000					1,004,000	100.0	1,189,000	100.0	1,004,000	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Bonds						0	0.0	0	0.0	0	XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
12.3 Defined						0	0.0	0	0.0	0	XXX
12.4 Other						0	0.0	0	0.0	0	XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
12.5 Defined						0	0.0	0	0.0	0	XXX
12.6 Other						0	0.0	0	0.0	0	XXX
12.7 Totals	1,004,000	0	0	0	0	1,004,000	100.0	1,189,000	100.0	1,004,000	XXX
12.8 Line 12.7 as a % of Col. 6	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations						0	0.0	0	0.0	XXX	0
13.2 Single Class Mortgage-Backed/Asset-Backed Bonds						0	0.0	0	0.0	XXX	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
13.3 Defined						0	0.0	0	0.0	XXX	0
13.4 Other						0	0.0	0	0.0	XXX	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
13.5 Defined						0	0.0	0	0.0	XXX	0
13.6 Other						0	0.0	0	0.0	XXX	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years					
	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets(a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year	0	0	0	0	0
2. Cost of short-term investments acquired	0				
3. Increase (decrease) by adjustment	0				
4. Increase (decrease) by foreign exchange adjustment	0				
5. Total profit (loss) on disposal of short-term investments	0				
6. Consideration received on disposal of short-term investments	0				
7. Book/adjusted carrying value, current year	0	0	0	0	0
8. Total valuation allowance	0				
9. Subtotal (Lines 7 plus 8)	0	0	0	0	0
10. Total nonadmitted amounts	0				
11. Statement value (Lines 9 minus 10)	0	0	0	0	0
12. Income collected during year	0				
13. Income earned during year	0				

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

SCHEDULE DB - PART A - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Owned

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year)	0
2.	Cost/Option Premium (Section 2, Column 7)	0
3.	Increase/(Decrease) by Adjustment (Section 1, Column 12)+(Section 3, Column 13)	0
4.	Gain/(Loss) on Termination:	
4.1	Recognized (Section 3, Column 14)	0
4.2	Used to Adjust Basis of Hedged Item (Section 3, Column 15)	0
5.	Consideration received on terminations (Section 3, Column 12)	0
6.	Used to Adjust Basis on Open Contracts (Section 1, Column 13)	0
7.	Disposition of deferred amount on contracts terminated in prior year:	
7.1	Recognized	
7.2	Used to Adjust Basis of Hedged Item	0
8.	Aggregate write-in book value, December 31, Current Year (Lines 1 + 2 + 3 + 4 – 5 – 6 - 7)	0

SCHEDULE DB - PART B - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Written

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year)	0
2.	Consideration received (Section 2, Column 7)	0
3.	Increase/(Decrease) by Adjustment (Section 1, Column 12)+(Section 3, Column 13)	0
4.	Gain/(Loss) on Termination:	
4.1	Recognized (Section 3, Column 14)	0
4.2	Used to Adjust Basis (Section 3, Column 15)	0
5.	Consideration paid on terminations (Section 3, Column 12)	0
6.	Used to Adjust Basis on Open Contracts (Section 1, Column 13)	0
7.	Disposition of deferred amount on contracts terminated in prior year:	
7.1	Recognized	
7.2	Used to Adjust Basis	0
8.	Aggregate write-in book value, December 31, Current Year (Lines 1 + 2 + 3 + 4 – 5 – 6 - 7)	0

SCHEDULE DB - PART C - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Swaps and Forwards

1. Aggregate write-in book value, December 31, prior year (Section 4, Line 8, prior year)	0
2. Cost or (Consideration Received) (Section 2, Column 7)	0
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) plus (Section 3, Column 13)	0
4. Gain/(Loss) on Termination:	
4.1 Recognized (Section 3, Column 14)	0
4.2 Used to Adjust Basis of Hedged Item (Section 3, Column 15)	0
5. Consideration received (or paid) on terminations (Section 3, Column 12)	0
6. Used to Adjust Basis of Hedged Item on Open Contracts (Section 1, Column 13)	0
7. Disposition of deferred amount on contracts terminated in prior year:	
7.1 Recognized	
7.2 Used to Adjust Basis of Hedged Item	0
8. Aggregate write-in book value, December 31, Current Year (Lines 1 + 2 + 3 + 4 – 5 – 6 - 7)	0

SCHEDULE DB - PART D - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Futures Contracts and Insurance Futures Contracts

1. Aggregate write-in book value, December 31, prior year (Section 4, Line 8, prior year)	0
2. Change in total Variation Margin on Open Contracts (Difference between years - Section 1, Column 6)	0
3.1 Change in Variation Margin on Open Contracts used to Adjust Basis of Hedged Item (Section 1, Column 11)	0
3.2 Change in variation margin on open contracts recognized (Difference between years - Section 1, Column 10)	0
4.1 Variation Margin on Contracts Terminated During the Year (Section 3, Column 6)	0
4.2 Less:	
4.21 Gain/(Loss) Recognized in Current Year (Section 3, Column 11)	0
4.22 Gain/(Loss) Used to Adjust Basis of Hedge (Section 3, Column 12)	0
4.3 Subtotal (Line 4.1 minus Line 4.2)	0
5.1 Net additions to Cash Deposits (Section 2, Column 7)	0
5.2 Less: Net Reductions to Cash Deposits (Section 3, Column 9)	0
6. Subtotal (Lines 1 - 2 + 3.1 + 3.2 - 4.3 + 5.2)	0
7. Disposition of Gain/(Loss) on Contracts Terminated in Prior Year:	
7.1 Recognized	
7.2 Used to Adjust Basis of Hedged Item	0
8. Aggregate write-in book value, December 31, Current Year (Lines 6 + 7.1 + 7.2)	0

SCHEDULE DB - PART E - VERIFICATION BETWEEN YEARS

Verification of Statement Value and Fair Value of Open Contracts

	Statement Value
1. Part A, Section 1, Column 10	0
2. Part B, Section 1, Column 10	0
3. Part C, Section 1, Column 10	0
4. Part D, Section 1, Column 9 - 12	0
5. Lines (1) - (2) + (3) + (4)	0
6. Part E, Section 1, Column 4	0
7. Part E, Section 1, Column 5	0
8. Lines (5) - (6) - (7)	0
	Fair Value
9. Part A, Section 1, Column 11	0
10. Part B, Section 1, Column 11	0
11. Part C, Section 1, Column 11	0
12. Part D, Section 1, Column 9	0
13. Lines (9) - (10) + (11) + (12)	0
14. Part E, Section 1, Column 7	0
15. Part E, Section 1, Column 8	0
16. Lines (13) - (14) - (15)	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE DB - PART F- SECTION 1

Summary of Replicated (Synthetic) Assets Open

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE DB - PART F - SECTION 2

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-to-Date	
	1	2	3	4	5	6	7	8	9	10
	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory	0	0	0	0	0	0	0	0	0	0
2. Add: Opened or Acquired Transactions									0	0
3. Add: Increases in Replicated Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
4. Less: Closed or Disposed of Transactions									0	0
5. Less: Positions Disposed of For Failing Effectiveness Criteria									0	0
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
7. Ending Inventory	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

[illegible]

50

50

50

50

Schedule S-Part 5
Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2002	2 2001	3 2000	4 1999	5 1998
A. OPERATIONS ITEMS					
1. Premiums.....	0	.0	.0	.0	.0
2. Title XVIII-Medicare.....	0	.0	.0	.0	.0
3. Title XIX-Medicaid.....	117	.101	123	.100	.0
4. Commissions and reinsurance expense allowance.....		.0	.0	.0	.0
5. Total medical and hospital expenses.....		.0	.0	.0	.0
B. BALANCE SHEET ITEMS					
6. Premiums receivable .....		.0	.0	.0	.0
7. Claims payable.....		.0	.0	.0	.0
8. Reinsurance recoverable on paid losses.....	0	.0	.0	.0	.0
9. Experience rating refunds due or unpaid.....		.0	.0	.0	.0
10. Commissions and reinsurance expense allowances unpaid.....		.0	.0	.0	.0
11. Unauthorized reinsurance offset.....	0	.0	.0	.0	.0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F).....	0	.0	.0	.0	.0
13. Letters of credit (L).....	0	.0	.0	.0	.0
14. Trust agreements (T).....	0	.0	.0	.0	.0
15. Other (O)	0	0	0	0	0

SCHEDULE S-PART 6
Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 9)	24,469,111		24,469,111
2. Amounts recoverable from reinsurers (Line 12)	0		0
3. Accident and health premiums due and unpaid (Line 10).....	0		0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (Balance).....	3,414,185		3,414,185
6. Total assets (Line 23)	27,883,296	0	27,883,296
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	13,750,000	0	13,750,000
8. Accrued medical incentive pool and bonus payments (Line 2).....	480,000		480,000
9. Premiums received in advance (Line 6).....	0		0
10. Reinsurance in unauthorized companies (Line 14).....	0		0
11. All other liabilities (Balance).....	6,773,048		6,773,048
12. Total liabilities (Line 18).....	21,003,048	0	21,003,048
13. Total capital and surplus (Line 26).....	6,880,248	XXX	6,880,248
14. Total liabilities, capital and surplus (Line 27)	27,883,296	0	27,883,296
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid.....	0		
16. Accrued medical incentive pool.....	0		
17. Premiums received in advance	0		
18. Reinsurance recoverable on paid losses	0		
19. Other ceded reinsurance recoverables	0		
20. Total ceded reinsurance recoverables	0		
21. Premiums receivable	0		
22. Unauthorized reinsurance	0		
23. Other ceded reinsurance payables/offsets	0		
24. Total ceded reinsurance payable/offsets	0		
25. Total net credit for ceded reinsurance	0		

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

MARCH FILING

- APRIL FILING**

- ## JUNE FILING

- ### EXPLANATIONS:

BAR CODE:

8.  9 5 7 5 9 2 0 0 2 3 3 0 5 8 0 0 0

OVERFLOW PAGE FOR WRITE-INS

M002 Additional Aggregate Lines for Page 02 Line 22.
*ASSETS

2204. Leasehold Improvement.....	61,152		61,152	74,026
2297. Summary of remaining write-ins for Line 22 from Page 2	61,152	0	61,152	74,026

M003 Additional Aggregate Lines for Page 03 Line 17.
*LIAB

1704. Accrued Profit Sharing.....	0		0	166,263
1705. Accrued 401(k) Match.....	1,865		1,865	2,559
1706. Accrued Taxes.....	0		0	91,000
1797. Summary of remaining write-ins for Line 17 from Page 03	1,865	0	1,865	259,822